

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 20 / 156
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
American Hospital Association PAC

**A.** Full Name (Last, First, Middle Initial)  
Mr. John T Evans, Jr.

Mailing Address P O Box 1887

City State Zip Code  
Wenatchee WA 98807-1887

FEC ID number of contributing federal political committee. **C**

Name of Employer Central Washington Hospital  
Occupation President and Chief Executive Officer

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
500.00

Date of Receipt  
M M / D D / Y Y Y Y  
1 0 / 0 8 / 2 0 0 7

**Transaction ID:** 14652827

Amount of Each Receipt this Period  
500.00

**B.** Full Name (Last, First, Middle Initial)  
Ms. Victoria S. Galanti

Mailing Address 300 Elliott Avenue W.  
Ste. 300

City State Zip Code  
Seattle WA 98119-4198

FEC ID number of contributing federal political committee. **C**

Name of Employer Washington State Hospital Association  
Occupation Executive Vice President

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
500.00

Date of Receipt  
M M / D D / Y Y Y Y  
1 0 / 0 8 / 2 0 0 7

**Transaction ID:** 14652828

Amount of Each Receipt this Period  
500.00

**C.** Full Name (Last, First, Middle Initial)  
Mr Robert Broermann

Mailing Address 6015 Poplar Hall Drive

City State Zip Code  
Norfolk VA 23502-3819

FEC ID number of contributing federal political committee. **C**

Name of Employer Sentara Healthcare  
Occupation Senior Vice President & CFO

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
250.00

Date of Receipt  
M M / D D / Y Y Y Y  
1 0 / 0 8 / 2 0 0 7

**Transaction ID:** 14653214

Amount of Each Receipt this Period  
250.00

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	1250.00
<b>TOTAL</b> This Period (last page this line number only) .....	▶	